

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: MIK et al.

Customer No.: 22927

Application No.: 09/098,481

Filed: June 16, 1998

For: METHOD AND APPARATUS FOR  
PROCESSING A CHARGE APPLIED  
TO A FINANCIAL ACCOUNT



Group Art Unit: 2763

Examiner: D. Smtih  
(703) 308-6989 / Phone  
(703) 308-9051 / Fax

Docket No. 98-017

Walker Digital Corporation  
Five High Ridge Park  
Stamford, CT 06905-1325  
(203) 461-7050 / voice  
(203) 595-8266 / fax

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ATT: Official Draftsperson  
Assistant Commissioner for Patents  
Washington, D.C. 20231

LETTER TO THE OFFICIAL DRAFTSPERSON

Sir:

Applicants respectfully submit a set of formal drawings (17 sheets: Figs. 1-16) for review and approval. No new matter has been added. This set replaces the formal set of drawings filed on July 2, 1999.

The Assistant Commissioner is hereby authorized to charge any fees required for the submission of these formal drawings or to credit any overpayment to Deposit Account No. 50-0271.

Respectfully submitted,

Brian M. Dugan  
Attorney for Applicants  
PTO Reg. No. 41,720  
Walker Digital Corporation  
Five High Ridge Park  
Stamford, CT 06905  
(203) 461-7121 / Phone  
(203) 595-8266 / Fax

May 25, 2000  
Date

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)**Applicant(s): **MIK et al.**

Docket No.

**98-017**

Serial No.

**09/098,481**

Filing Date

**June 16, 1998**

Examiner

**D. Smith**

Group Art Unit

**2763**Invention: **METHOD AND APPARATUS FOR PROCESSING A CHARGE APPLIED TO FINANCIAL ACCOUNTS**

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I hereby certify that this **Formal Drawings***(Identify type of correspondence)*

is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The

Assistant Commissioner for Patents, Washington, D.C. 20231 on

**May 25, 2000***(Date)***Jill Doherty***(Typed or Printed Name of Person Mailing Correspondence)*  
*(Signature of Person Mailing Correspondence)***Note: Each paper must have its own certificate of mailing.**

GP  
2763

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BOX OFFICIAL DRAFTSPERSON  
Assistant Commissioner for Patents  
Washington, D.C. 20231

TRANSMITTAL LETTER

Sir:

Applicants hereby submit the following documents for the above-identified patent application:

1. Letter to Official Draftsperson;
2. Formal Drawings, (17 sheets, figures 1-16);
3. Certificate of First Class Mail; and
4. Acknowledgment Postcard.

The Assistant Commissioner is hereby authorized to charge \$0.00 to Deposit Account No. 50-0271. Order No. 98-017. The Assistant Commissioner is further authorized to charge any additional fees which may be required for the submission of this paper, or to credit any overpayment, to Deposit Account No. 50-0271. Order No. 98-017. A duplicate copy of this sheet is attached.

Respectfully submitted,

Brian M. Dugan

Attorney for Applicants  
PTO Reg. No. 41,720  
Walker Digital Corporation  
Five High Ridge Park  
Stamford, CT 06905

May 25, 2000  
Date

Certificate of Mail

I hereby certify that this correspondence is being sent via First Class Mail, with sufficient postage addressed to Assistant Commissioner for Patents, Washington, DC, 20231 on May 25, 2000.

Jill Doherty  
Typed Name of Person Making Deposit

Signature

05/25/2000  
Date

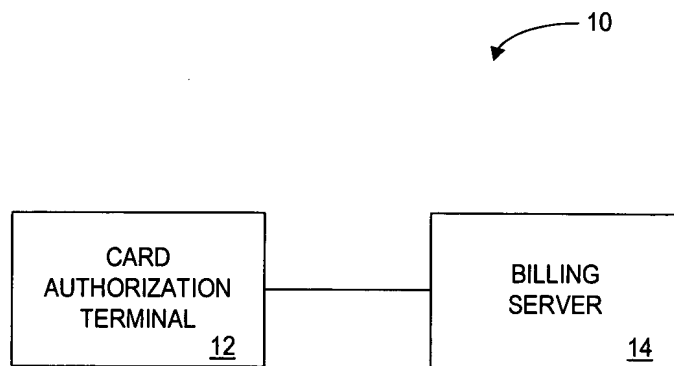


FIG. 1

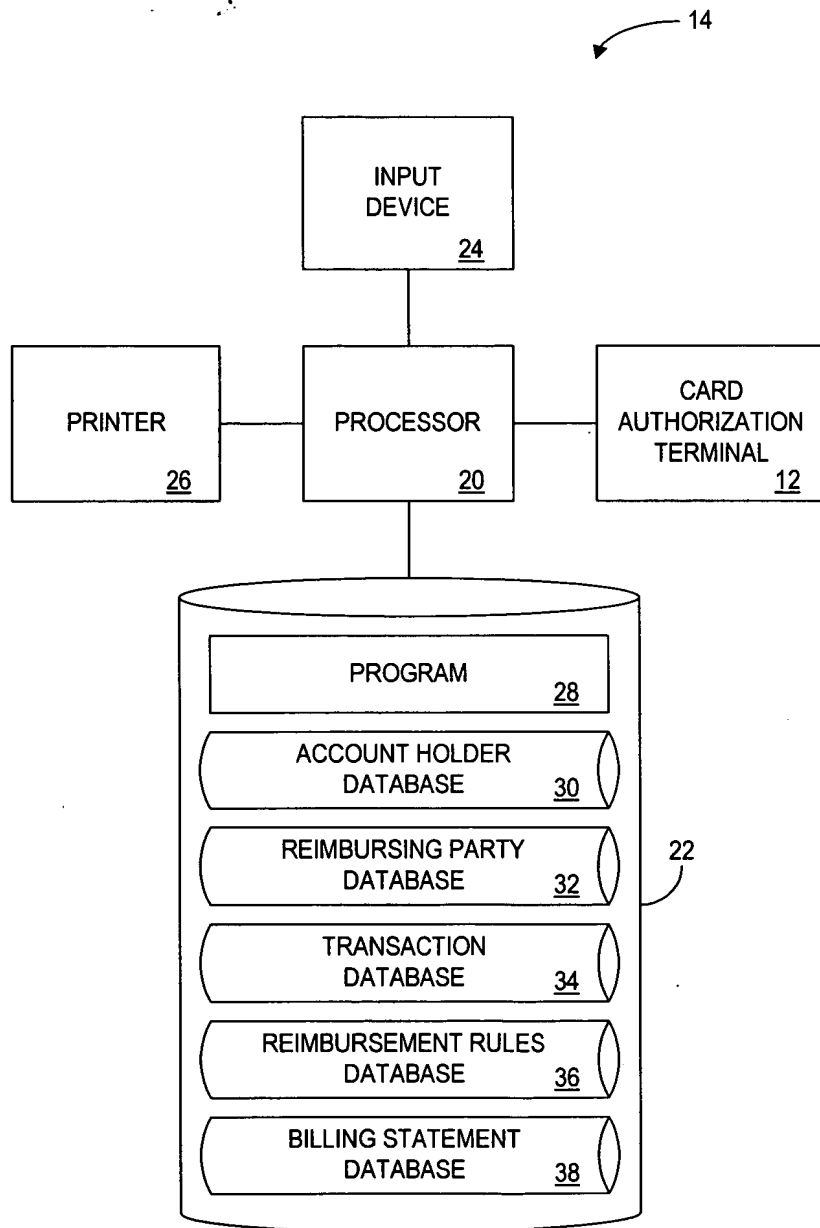


FIG. 2

ACCOUNT IDENTIFIER 64	ACCOUNT HOLDER NAME 66	ACCOUNT HOLDER BILLING ADDRESS 68	MAXIMUM BALANCE 70	AVAILABLE BALANCE 72
1111-1111-1111-1111	BILL JONES	123 MAIN ST. CITY, STATE	\$5,000	\$4,975
1111-1122-2222-2222	SUE JOHNSON	87 PLACE LANE TOWN, USA	\$7,000	\$3,000
1111-9824-2345-6523	TIM SMITH	18 PLACE RD. TOWN, USA	\$10,000	\$7,500
1111-4397-9371-9571	MARY PARKER	21 STREET TOWN, USA	\$1,000	\$200
1111-9471-3856-1936	SALLY MARTIN	98 AVENUE TOWN, USA	\$4,000	\$1,500
1111-0385-2987-0973	MIKE McDONALD	55 STREET PLACE, USA	\$1,500	\$250

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FIG. 3

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REIMBURSING PARTY IDENTIFIER <sup>90</sup>	REIMBURSING PARTY DESCRIPTOR <sup>92</sup>	TOTAL AMOUNT OF PAYMENT DUE <sup>94</sup>
R 729	CORPORATION X	\$180.00
R 730	INSURER Z	\$3,482.00
R 731	GRANDMA JONES	\$15.00
R 732	STOP & SHOP	\$0.00

82  
84  
86  
88

FIG. 4

100

ACCOUNT IDENTIFIER 1111-1111-1111-1111						102
TRANSACTION IDENTIFIER 110	MERCHANT IDENTIFIER 112	POS IDENTIFIER 114	TRANSACTION DATE 116	TRANSACTION DESCRIPTION 118	TRANSACTION AMOUNT 120	
987654	66666	AB 123	4/7/98	SIC CODE: 5182 RESTAURANT	\$125.00	
123456	55555	CD 234	4/7/98	SIC CODE: MEDICAL CARE PROVIDER	\$150.00	
123795	99999	XY 327	4/7/98	MERCHANT CODE: FOOTLOCKER	\$100.00	

104

106

108

FIG. 5



130

ACCOUNT IDENTIFIER 1111-1111-1111-1111							132
REIMBURSING PARTY IDENTIFIER 142	REIMBURSEMENT CONDITION 144	REIMBURSEMENT AMOUNT 146	BILLING DESTINATION 148	TIME TO REIMBURSE 150	ACCOUNT ALIAS 152	ALLOWED FREQUENCY OF TRANSACTIONS 154	
R 729	MERCHANT CODE: JOE'S OFFICE SUPPLY	50% OF TRANSACTION UP TO \$80	OFFICEMANAGER@CORPX.COM	60 DAYS	1111-1111-WJONES	ONE TIME ONLY	
R 729	SIC CODE: RESTAURANT	TRANSACTION AMOUNT UP TO \$100	PO BOX 1 CHICAGO, ILLINOIS	30 DAYS	1111-1111-WJONES	TWICE / WEEK	
R 730	SIC CODE: MEDICAL CARE PROVIDER	95% OF TRANSACTION AMOUNT	1 CORPORATE PARK. LOS ANGELES, CA	30 DAYS	1234567890	NO LIMIT	
R 731	ALWAYS	POS CODE 234 (\$10)	1 MAIN ST. BOSTON, MA	30 DAYS	BILLY JONES82	ONE TIME PER CODE	

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FIG. 6

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TRANSACTION IDENTIFIER <u>170</u>	TRANSACTION AMOUNT <u>172</u>	CHARGE AMOUNT <u>174</u>	PARTY TO CHARGE <u>176</u>	BILLING DESTINATION <u>178</u>	PAYMENT STATUS <u>180</u>
123456	\$150.00	\$142.50	R 730	1 CORPORATE PARK LOS ANGELES, CA	BILLED 4/29/98 PAID 5/13/98
123456	\$150.00	\$7.50	1111-1111-1111-1111	123 MAIN ST. CITY, STATE	BILLED 4/30/98 NOT PAID

162

164

FIG. 7

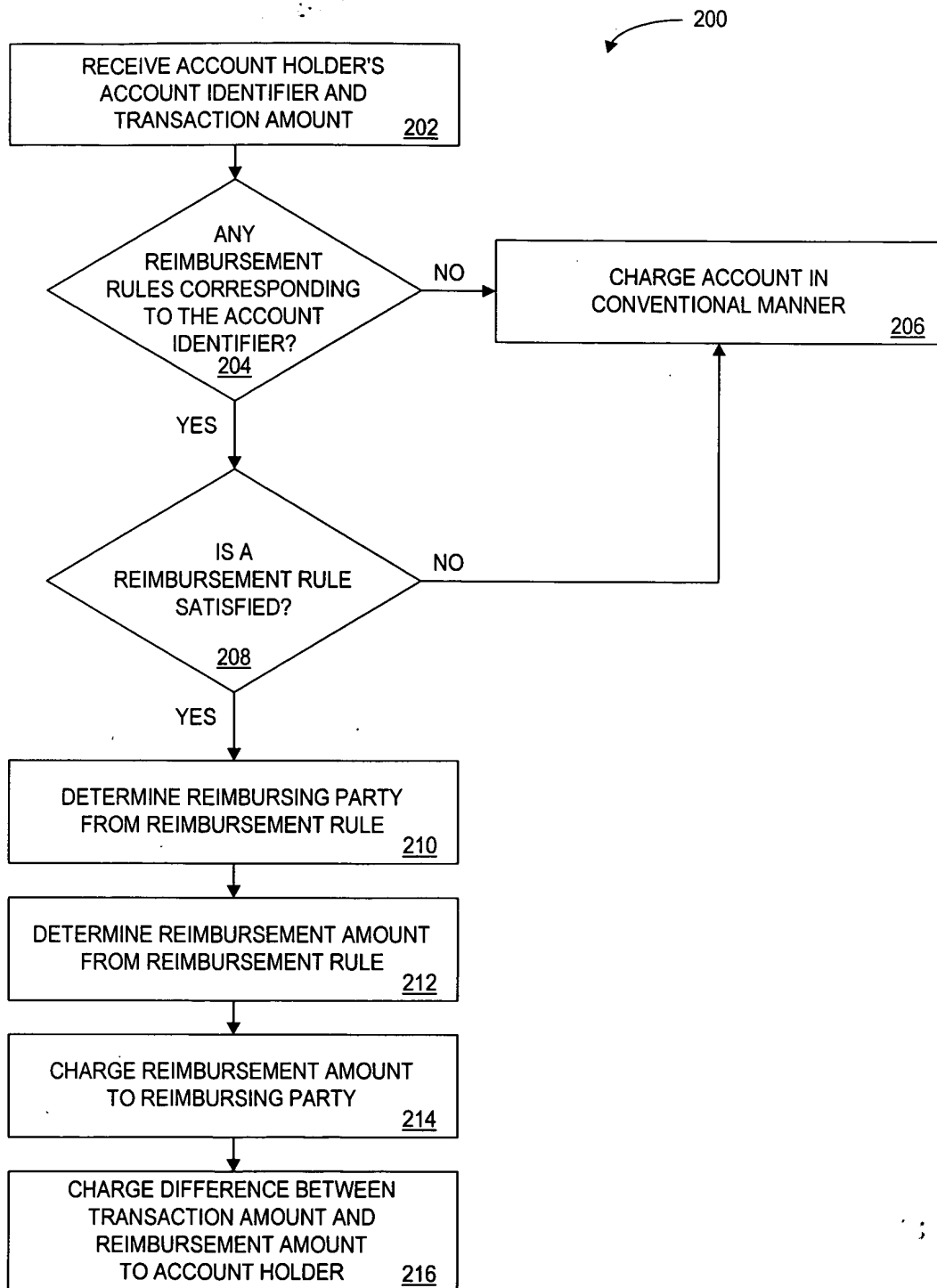


FIG. 8

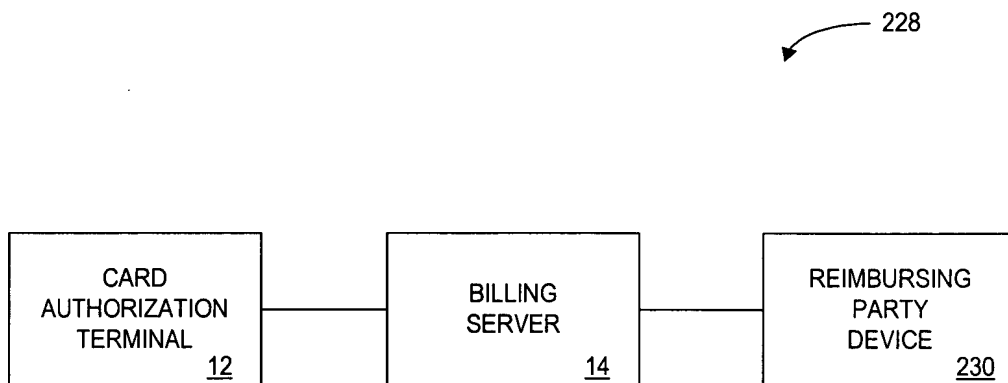


FIG. 9

240

ACCOUNT IDENTIFIER 1111-1111-1111-1111							242
REIMBURSING PARTY IDENTIFIER 252	REIMBURSEMENT CONDITION 254	COMMUNICATION ADDRESS FOR APPROVAL REQUEST 256	REIMBURSEMENT AMOUNT 258	BILLING DESTINATION 260	TIME TO REIMBURSE 262	ACCOUNT ALIAS 264	
R 729	MERCHANT CODE: JOE'S OFFICE SUPPLY	FINANCE @CORPX.COM	50% OF TRANSACTION UP TO \$80	OFFICEMANAGER@ CORPX.COM	60 DAYS	1111-1111- WJONES	
R 729	SIC CODE: RESTAURANT	203-555-1234	TRANSACTION AMOUNT UP TO \$100	PO BOX 1 CHICAGO, ILLINOIS	30 DAYS	1111-1111- WJONES	
R 730	SIC CODE: MEDICAL CARE PROVIDER	212-555-8888	95% OF TRANSACTION AMOUNT	1 CORPORATE PARK. LOS ANGELES, CA	30 DAYS	1234567890	
R 731	ALWAYS	617-555-8765	POS CODE 234 (\$10)	1 MAIN ST. BOSTON, MA	30 DAYS	BILLYJONES82	

244

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248

250

FIG. 10

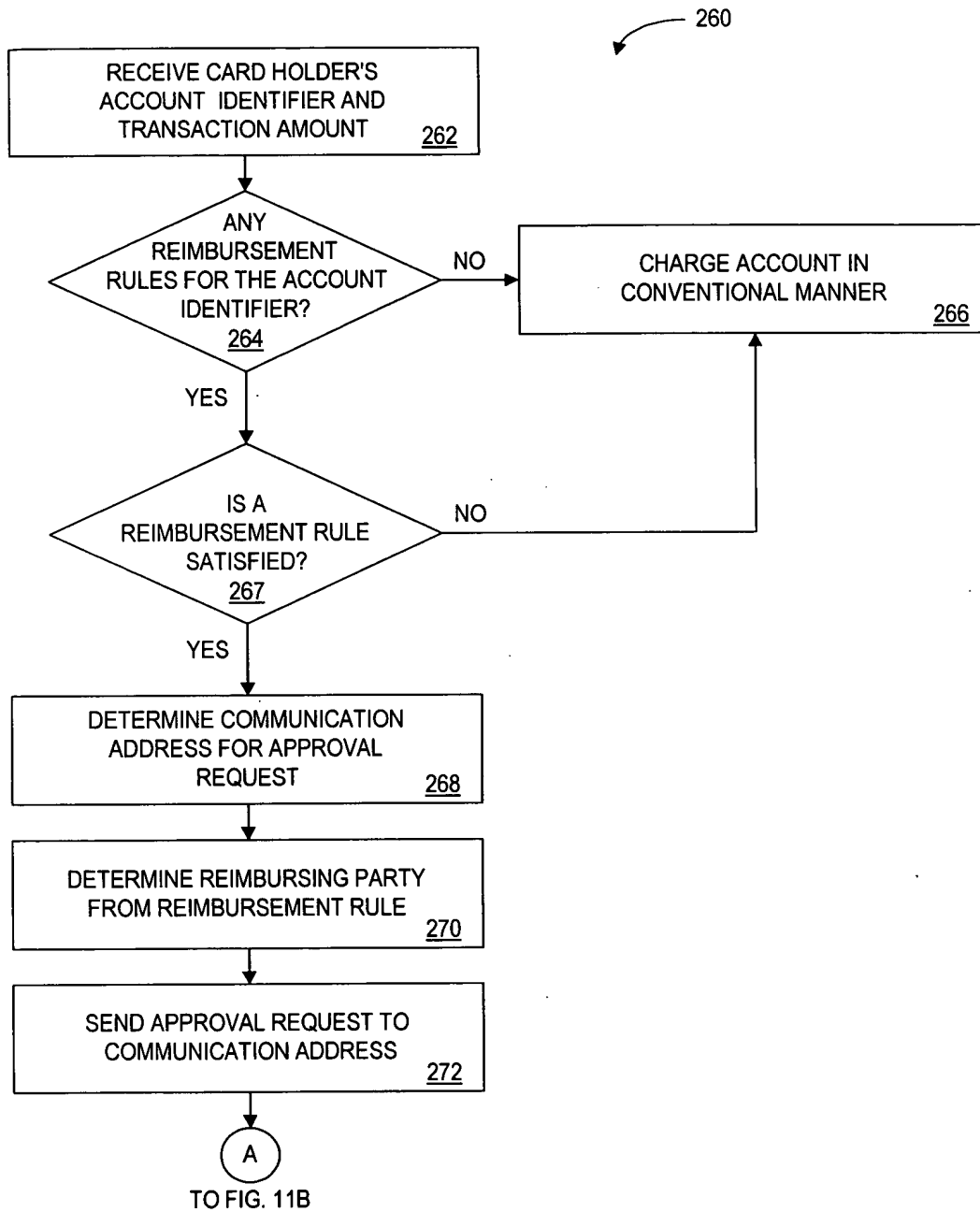


FIG. 11A

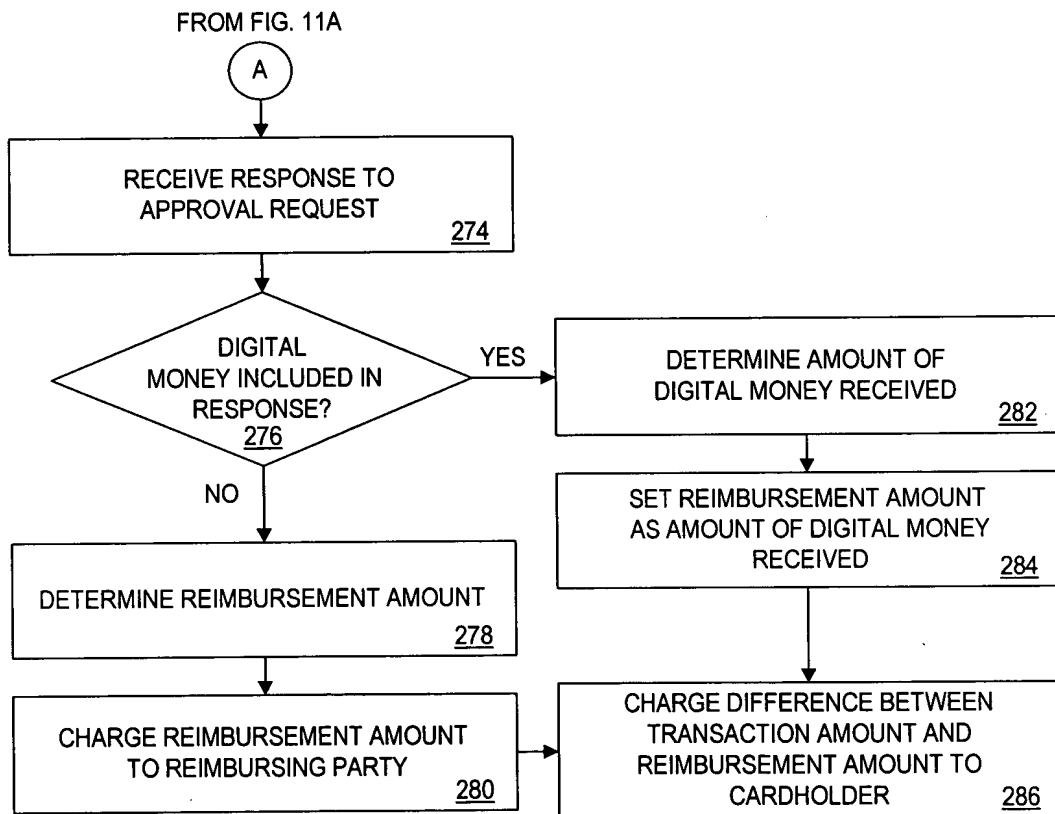


FIG. 11B

280

TRANSACTION IDENTIFIER 170	TRANSACTION AMOUNT 172	CHARGE AMOUNT 174	PARTY TO CHARGE 176	BILLING DESTINATION 178	PAYMENT STATUS 180
987654	\$125.00	\$100.00	R 729	PO BOX 1 CHICAGO, IL	BILLED 5/1/98 NOT PAID
987654	\$125.00	\$25.00	1111-1111-1111-1111	123 MAIN ST. CITY, STATE	BILLED 5/7/98 NOT PAID

282

284

FIG. 12



300

**BIG REGIONAL BANK**

STATEMENT DATE 5/1/98  
PAYMENT DUE 6/6/98

BILL TO:  
CORPORATION X  
PO BOX 1  
CHICAGO, IL

312

310

308

ACCOUNT IDENTIFIER	TRANSACTION IDENTIFIER	TRANSACTION DATE	TRANSACTION DESCRIPTION	MERCHANT IDENTIFIER	AMOUNT
1111-1111-WJONES	987654	4/7/98	SIC CODE:5812 RESTAURANT	66666	\$100.00
TOTAL PAYMENT DUE: \$100.00					

301

302

304

306

FIG. 13

320

**BIG REGIONAL BANK**

STATEMENT DATE 5/7/98  
PAYMENT DUE 5/29/98  
ACCOUNT NUMBER 1111-1111-1111-1111

321

**BILL TO:**  
BILL JONES  
123 MAIN ST.  
CITY, STATE

332

330

TRANSACTION IDENTIFIER	TRANSACTION DATE	TRANSACTION DESCRIPTION	MERCHANT IDENTIFIER	TRANSACTION AMOUNT	AMOUNT
987654	4/7/98	SIC CODE:5812 RESTAURANT	66666	\$125.00	\$25.00
322	324	326	328	TOTAL PAYMENT DUE: \$25.00	

FIG. 14

350

ACCOUNT IDENTIFIER <u>352</u>	ACCOUNT ALIAS <u>354</u>
1111-1111-1111-1111	1111-1111- BCDE-EFGH
1111-1122-2222-2222	1111-1122- ABCD-EFGH
1111-9824-2345-6523	1111-9824- 8549-ASIB
1111-4397-9371-9571	1111-4397- AGUZ-YEPT

FIG. 15

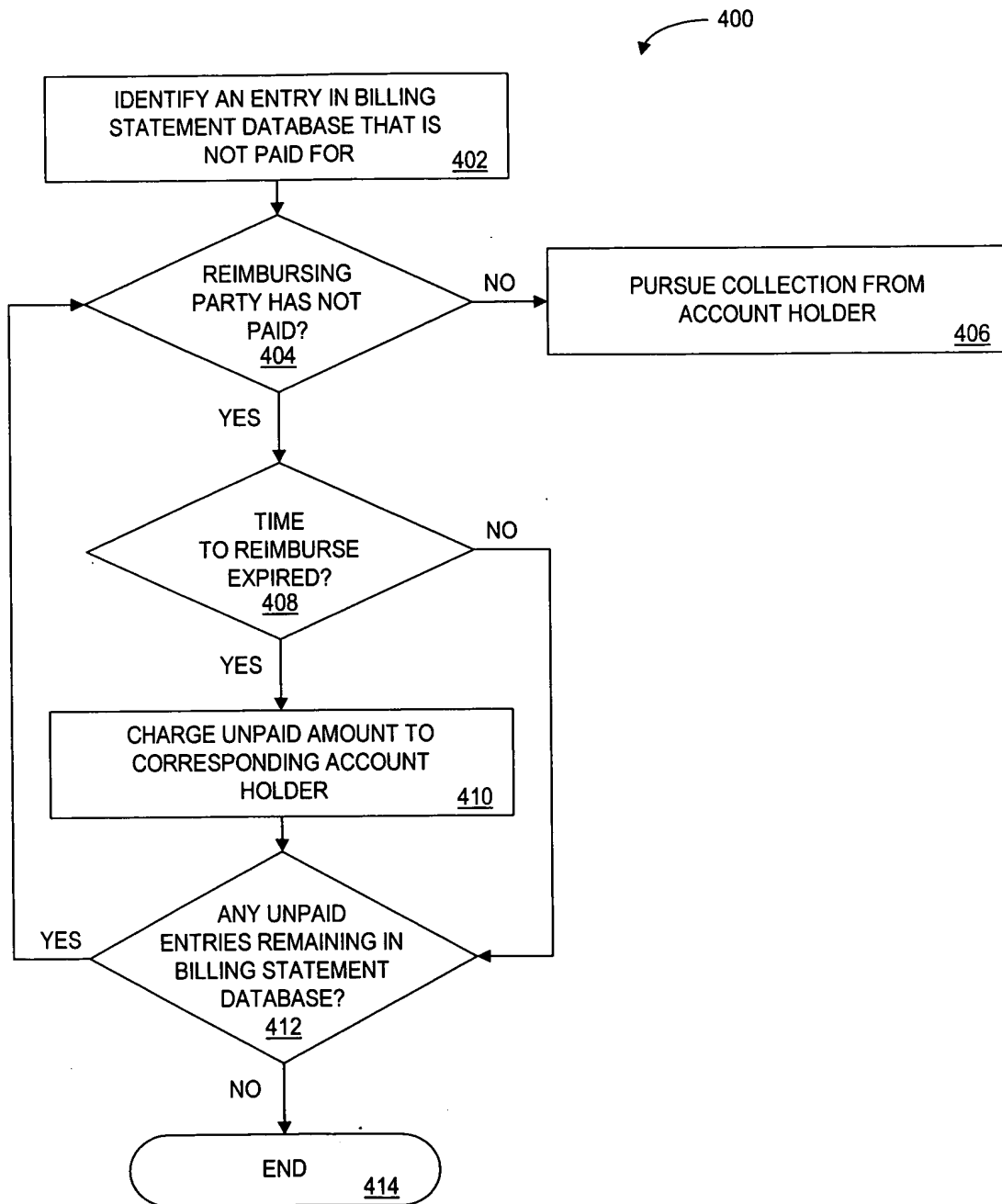


FIG. 16